GENERAL FACT SHEET

BRIEF TITLE

APPROVAL DEADLINE

REASON

Contract with State DHHS to provide direct medical services in the form of

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DETAILS				POSITION:
health screening &	& vaccinations to re-	fugees		
direct medical se	rvices in the form of	Ī		

DETAILS	POSITIONS/RECOMMENDATIONS		
Agreement between the Nebraska Department of Health and Human Services Division of Children and Family Services and the Lincoln Lancaster County	Sponsor		
Health Department (LLCHD) whereby LLCHD will provide direct medical services in the form of health screening and vaccinations to refugees for the period of October 1, 2008 to September 30, 2010.	Program Departments, or Groups Affected	All automated departments	
	Applicants/ Proponents	Applicant	
		City Department	
		Other	
Discussion (Including Relationship to other Council Actions)	Opponents	Groups or Individuals	
		Basis of Opposition	
	Staff Recommendations	□ For □ Against Reason Against	
	Board or Commission Recommendation	BY For Against No Action Taken For with revisions or conditions (See Details column for conditions)	
	CITY COUNCIL ACTIONS (For Council Use Only)	 □ Pass □ Pass (As Amended) □ Council Sub. □ Without Recommendation □ Hold □ Do not Pass 	

DETAILS	POLICY/PF	POLICY/PROGRAM IMPACT		
	POLICY OR PROGRAM CHANGE	D NO D YES		
	OPERATIONAL IMPACT ASSESSMENT			
	FINANCES			
	COST AND REVENUE PROJECTIONS	COST of total project: \$ COST of this Ordinance/ Resolution \$		
		RELATED annual operating Costs \$		
		INCREASE REVENUE EXPECTED/YEAR \$		
	SOURCE OF FUNDS	CITY [Approximately] \$\$		
		NON CITY [Approximately]		
·	BENEFIT COST ☐ Front Foot ☐ Square Foot	Average Assessment \$\$		

APPLICABLE DATES:

FACT SHEET PREPARED BY:

Bruce Dart, PhD

Health Director

REVIEW BY:

REFERENCE NUMBER